

Substitute for form 1449/PTO			Complete if Known		
EIGHTH SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(Use as many sheets as necessary)</i>			Application Number	09705927	
			Filing Date	November 6, 2000	
			First Named Inventor	David D KLOBA	
			Art Unit	2178	
			Examiner Name	Faber, David	
Sheet	1	of	1	Attorney Docket Number	1933.0010009

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Examiner initials*	Cite No. ¹	Document Number Number-Kind Code ² (if known)	Publication Date MM/YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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	FP1					
	FP2					
	FP3					
	FP4					
	FP5					
	FP6					

Examiner Signature	/David Faber/	Date Considered	08/04/2010
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